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Weyerhaeuser Legal

WEYERHAEUSER LAW DEPARTMENT

15:58:37 06-08-2005

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PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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28624 7590 03/08/2005
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 P.O. BOX 9777
 FEDERAL WAY, WA 98063
 06/09/2005 HDEHES2 00000046 231480 09875177

01 FC:1501 1400.00 DA
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 I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Susan J. Firm

(Depositor's name)

Susan J. Firm

(Signature)

06/08/05

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/875,177	06/06/2001	Joseph Lincoln Komen	24484	7704

TITLE OF INVENTION: HYPOCHLORITE FREE METHOD FOR PREPARATION OF STABLE CARBOXYLATED CARBOHYDRATE PRODUCTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	06/08/2005
EXAMINER	ART UNIT		CLASS-SUBCLASS		
WHITE, EVERETT NM/N	1623		536-124000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

WEYERHAEUSER COMPANY

Federal Way, Washington

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

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The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 231480 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Date 6/8/05

Typed or printed name

John M. Crawford

Registration No. 19,670

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June 8, 2005

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FROM:	NAME:	Susan Finn
	MAIL ADDRESS:	Law Department – Intellectual Property Group Weyerhaeuser Company - CH 1J27 PO Box 9777 Federal Way WA 98063-9777
	TEL NUMBER:	253/924-2997
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MESSAGE:

RE: Application No.: 09/875,177
Filing Date: 06/06/2001
Attorney Docket #: 24484

Attached you will find:

Part B – Fee(s) Transmittal